

APPENDIX E

TECHNICAL DESCRIPTION OF THE 2000 TRICARE CONSUMER REPORTS

The consumer reports will present 12 scores for each region and catchment area in the MHS and for the MHS overall. Scores will enable users to compare providers to national benchmarks in these areas: getting needed care, getting care quickly, courteous and helpful office staff, how well doctors communicate, customer service, claims processing, rating of the health plan, health care, personal doctor, and specialist, and preventive care standards. A combined score will enable the user to rank providers based on a weighted combination of 11 scores. These 11 scores are made up of three different types, described in TABLE E.1: CAHPS composites, ratings, and TMA standard composites.

TABLE E.1
CONTENT OF THE 2000 TRICARE CONSUMER REPORTS

CAHPS COMPOSITES
The CAHPS composites group together survey responses to a set of related HCSDDB questions taken from CAHPS. Scores expressed as CAHPS composites profile TRICARE beneficiaries' satisfaction with their ability to get needed care, the speed with which they receive care, interactions with their doctor, their experience with doctors' offices, their experience with customer service representatives, and their experience with claims processing. Scores will be presented in relation to national benchmarks.
SATISFACTION RATINGS
Scores expressed as ratings reflect beneficiaries' self-rated satisfaction with their health plan, health care, and personal providers. The scores, adjusted for patient age and health status, will be presented relative to national benchmarks.
TMA STANDARD COMPOSITES
Only one TMA standard composite score is reported. The score is based on how the preventive care that beneficiaries received compares with Healthy People 2010 standards. Preventive care indicators to be combined are prenatal care, hypertension screening, flu immunization, mammography, and Pap smears.

TABLE E.2 lists the questions and response choices for the CAHPS composites in the consumer reports. Question numbers refer to the CAHPS 2.0H Adult Questionnaire (Commercial). Response choices for each question within a composite are collapsed into three-item scales so that all composites have the same range. Along with the composites, mean responses to each question will be presented and compared to national civilian benchmarks.

Four scores are based on respondents' ratings of health care and health care providers: health plan, health care, PCM, and specialist. These ratings are measures of overall beneficiary satisfaction. Questions about these aspects of care ask beneficiaries to rate their health plan, health care, and physicians on a scale of 0 to 10, with 0 being the worst and 10 being the best. The rating score will be the mean. For the purpose of presentation, the mean will be multiplied by 100 so that the score will be presented on a scale of 0 to 100.

TABLE E.2

CAHPS 2.0 H QUESTIONS AND RESPONSE CHOICES
EXPRESSED AS COMPOSITE SCORES AND RATINGS

GETTING NEEDED CARE		RESPONSE CHOICE
Q6	With the choices your health plan gave you, how much of a problem, if any, was it to get a personal doctor or nurse you are happy with?	A big problem A small problem Not a problem
Q10	In the last 12 months, how much of a problem, if any, was it to get a referral to a specialist that you needed to see?	A big problem A small problem Not a problem
Q24	In the last 12 months, how much of a problem, if any, was it to get the care you or a doctor believed necessary?	A big problem A small problem Not a problem
Q25	In the last 12 months, how much of a problem, if any, were delays in health care while you waited for approval from your health plan?	A big problem A small problem Not a problem
GETTING CARE QUICKLY		
	In the last 12 months, when you called during regular office hours, how often did you get the help or advice you needed?	Never Sometimes Usually Always
Q17	In the last 12 months, how often did you get an appointment for regular or routine care as soon as you wanted?	Never Sometimes Usually Always
Q20	In the last 12 months, when you needed care right away for an illness or injury, how often did you get care as soon as you wanted?	Never Sometimes Usually Always
Q26	In the last 12 months, how often did you wait in the doctor's office or clinic more than 15 minutes past your appointment time to see the person you went to see?	Never Sometimes Usually Always

TABLE E.2 (continued)

HOW WELL DOCTORS COMMUNICATE		RESPONSE CHOICE
Q29	In the last 12 months, how often did doctors or other health providers listen carefully to you?	Never Sometimes USUALLY Always
Q30	In the last 12 months, how often did doctors or other health providers explain things in a way you could understand?	Never Sometimes Usually Always
Q31	In the last 12 months, how often did doctors or other health providers show respect for what you had to say?	Never Sometimes Usually Always
Q32	In the last 12 months, how often did doctors or other health providers spend enough time with you?	Never Sometimes Usually Always
COURTEOUS AND HELPFUL OFFICE STAFF		
Q27	In the last 12 months, how often did office staff at a doctor's office or clinic treat you with courtesy and respect?	Never Sometimes Usually Always
Q28	In the last 12 months, how often were office staff at a doctor's office or clinic as helpful as you thought they should be?	Never Sometimes Usually Always
CUSTOMER SERVICE		
Q39	In the last 12 months, how much of a problem, if any, was it to find or understand information in the written materials?	A big problem A small problem Not a problem
Q41	In the last 12 months, how much of a problem, if any, was it to get the help you needed when you called your health plan's customer service?	A big problem A small problem Not a problem
Q46	In the last 12 months, how much of a problem, if any, did you have with paperwork for your health plan?	A big problem A small problem Not a problem

TABLE E.2 (continued)

CLAIMS PROCESSING		RESPONSE CHOICE
Q35	In the last 12 months, how often did your health plan handle your claims in a reasonable time?	Never Sometimes Usually Always
Q36	In the last 12 months, how often did your health plan handle your claims correctly?	Never Sometimes Usually Always
Rating of all health care		
Q33	We want to know your rating of all your health care in the last 12 months from all doctors and other health providers. Use any number from 0 to 10, where 0 is the worst health care possible and 10 is the best health care possible. How would you rate all your health care?	0 Worst health care possible 1 2 3 4 5 6 7 8 9 10 Best health care possible
Rating of Health Plan		
Q47	We want to know your rating of all your experience with your health plan. Use any number from 0 to 10, where 0 is the worst health plan possible and 10 is the best health plan possible. How would you rate your health plan now?	0 Worst health plan possible 1 2 3 4 5 6 7 8 9 10 Best health plan possible

TABLE E.2 (continued)

RATING OF PERSONAL DOCTOR		RESPONSE CHOICE
Q8	We want to know your rating of your personal doctor or nurse. Use any number from 0 to 10, where 0 is the worst possible doctor or nurse possible and 10 is the best personal doctor or nurse possible. How would you rate your personal doctor or nurse now?	0 Worst personal doctor or nurse possible 1 2 3 4 5 6 7 8 9 10 Best personal doctor or nurse possible
RATING OF SPECIALIST		
Q12	We want to know your rating of the specialist you saw most often in the last 12 months, including a personal doctor, if he or she was a specialist. Use any number from 0 to 10, where 0 is the worst possible specialist possible and 10 is the best specialist possible. How would you rate your specialist?	0 Worst specialist possible 1 2 3 4 5 6 7 8 9 10 Best specialist possible

The preventive care composite in the consumer reports will measure MHS performance in terms of meeting TMA's goals for the provision of preventive services. The composite will be calculated by combining the responses to individual questions pertaining to these goals. Questions and responses from the present version of the 2000 HCSDB that will be incorporated into the preventive care composite are presented in TABLE E.3. The denominator of an individual's composite score will consist of the number of questions to which that individual responded. The numerator will consist of the number of questions for which the response falls into a "desirable" category, where the desirable categories are as indicated. When individual scores are combined, the resulting composite will be weighted by the number of questions to which that individual has responded. Therefore, the weight a particular question receives in the composite score will be based on the number of responses it "receives". A respondent's weight will reflect the number of questions to which he/she responds. The resulting proportion will be presented as a percentage.

TABLE E.3

QUESTIONS AND RESPONSE CHOICES ON PREVENTIVE CARE
EXPRESSED AS A STANDARD TMA COMPOSITE

COMPOSITE PREVENTIVE CARE		RESPONSE CHOICES
Q57	About how long has it been since you last had your blood pressure taken by a doctor, nurse or other health professional?	Less than 1 year ago 1 year ago 2 years ago 3 or more years ago
Q58	Do you know whether your blood pressure is too high?	Never Don't know Yes No
Q64	When did you last have a flu shot?	Less than 12 months ago 1-2 years ago More than 2 years ago Never Had a Flu Shot
Q73	How long has it been since you had your last Pap smear?	Less than 1 year ago 1 year ago 2 years ago 3 or more years ago Never
Q71	How long has it been since you had your last mammogram?	Less Than 1 Year Ago 1 year ago 2 years ago 3 or more years ago Never
Q75	When did you first receive trimester care for this pregnancy?	First trimester Second trimester Third trimester